

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David M. GOLDENBERG, et al.
Title: IMMUNOTHERAPY FOR CHRONIC MYELOCYTIC LEUKEMIA
Appl. No.: To Be Assigned
Filing Date: August 8, 2001
Examiner: Unassigned
Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

David M. Goldenberg
Hans J. Hansen

☒ [X] Applicants claim small entity status under 37 CFR 1.27.

Enclosed are:

☒ [X] Specification, Claim(s), and Abstract (30 pages).

☒ [X] Unexecuted Declaration and Power of Attorney (4 pages).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$710.00	\$710.00
Total Claims:	24	- 20	= 4	x \$18.00	= \$72.00
Independents:	2	- 3	= 0	x \$80.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$270.00	= \$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration				+ \$130.00	= \$130.00
				SUBTOTAL:	= \$912.00
[X]				Small Entity Fees Apply (subtract 1/2 of above):	= \$456.00
				TOTAL FILING FEE:	= \$456.00

- [] A check in the amount of \$0.00 to cover the filing fee is enclosed.
- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 8, 2001

By 

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